

REMARKS

Reconsideration is requested.

Claims 1-3, 5, 6, 9-11, 13-16 and 49-51 are pending. The allowance of claims 11 and 13-15 is acknowledged, with appreciation. See page 6 of the Office Action dated December 22, 2008.

The Examiner's comments regarding the priority document are noted. The undersigned notes that a certified translation of the priority document was filed February 19, 2008 and is contained in the PTO IFW. The Examiner has confirmed to the undersigned in a telephone message received January 8, 2009 that the translation has been received and that nothing further is required in this regard. The Examiner's Interview Summary mailed January 22, 2009 is accurate in its brief summary of the issues discussed. Nothing further is believed to be required in this regard however the Examiner is requested to contact the undersigned, preferably by telephone, if otherwise.

The Examiner's comments regarding the specification are noted however as the same do not appear to contain an objection and/or rejection of the specification, nothing further is believed to be required with regard to the specification. The Examiner is requested to contact the undersigned, preferably by telephone, in the event the Examiner's comments have been misunderstood and/or in the event the specification has been objected-to and/or rejected.

The Section 103 rejection of claims 1-3, 5-6, 9-10, 16 and 49-51 over the combination of Seddon et al. (U.S. Patent 5,491,220), Hanai et al. (U.S. Patent 5,952,472) and Owen et al. (Journal of Immunological Methods, 1994, 168: 149-165), is

traversed. Reconsideration and withdrawal of the rejection are requested in view of the following distinguishing comments.

The Examiner is understood to believe that Seddon et al. teach a method of treating, in particular, rheumatoid arthritis, which allegedly involved administering an inhibitor of FGF. The Examiner acknowledges that Seddon al. did not teach the treatment of arthritis using an antibody as the inhibitor of FGF. The Examiner is understood to believe however that antibodies to FGF, particularly anti-FGF-8 antibodies, as inhibitors of FGF, were allegedly well known in the art at the time of the invention was made.

The Examiner is also understood to believe that an ordinarily skilled person would have allegedly been motivated to have used the anti-FGF-8 antibody to treat arthritis given the treating by Seddon et al. stating FGF antagonists "that acts as angiogenesis inhibitor are useful for the treatment of disease where neovascularization is dominant in the pathology such as ... chronic inflammation, rheumatoid arthritis and the like" and the teaching of Hanai "in the anti-FGF-8 antibody having neutralization activity specifically against FGF-8 would be effective in treating cancer wherein neovascularization is dominant in pathology." See page 5 of the Office Action dated December 22, 2008.

The applicants disagree with the Examiner's conclusions regarding the combination of the cited art. Specifically, the applicants submit that Seddon et al. disclose the fibroblast growth factor structural. analogues which have various and desirable physiological properties, including FGF agonist and potential antagonist. More

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specifically, Seddon et al. produce FGF-2 analogues partially replaced with other growth factor such as FGF-1 and IL-1 β in the embodiments of the specification, but do not produce any FGF analogues to antagonize FGF-8 biological function. Seddon et al. also disclose broadly inhibitory effects and stimulative effects of FGF analogues (see column 6, lines 16-32 of the specification) and solely describe FGF antagonists are useful as angiogenesis inhibitors wherein treating neovascularization is dominant in the pathology such as rheumatoid arthritis. However Seddon et al. does not teach or suggest FGF-8 as the specific FGF to target for treating arthritis or the correlation of arthritis and an anti-FGF-8 antibody.

Moreover, Hanai et al. do not teach or suggest that anti-FGF-8 antibody is useful to treat diseases such as cancer where neovascularization plays a dominant role in the pathogenesis.

Therefore one of ordinary skill in the art would not have been motivated to have used an anti-FGF-8 antibody for treating arthritis patients at the time of the present application, one would have combined the cited combination of art in the absence of the claimed invention.

The claims are submitted to be in condition for allowance and a Notice to that effect is requested. The Examiner is requested to contact the undersigned, preferably by telephone, in the event anything further is required.

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Respectfully submitted,

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